



Agreement No. (To be filled in by Agreement Manager)

Task No. _____ Amendment No. _____ Work Order No(s). _____

All terms and conditions of this agreement are in full force and effect for this Task Order document.

Project Information

Project Title	
State Route No(s).	Fed. Aid Project No(s).
Org. Code of Work Order No(s).	Fed. Aid Participating Percentage(s):

Task Manager Information

Task Manager	Phone	Mailstop
Mailing Address		

Consultant

Consultant	Contact
Address	Phone
	Federal I.D. No.

Scope of Task Order

Provide brief description of work and reference attachments for prime consultant and all subconsultants (to include detailed description of work schedule and estimate).

Report Due Date

Task Schedule and Cost

New Task

Task Amendment

Pretask Start Date _____ <i>No payment for pre-task work done PRIOR to this date</i>	Pre-Task Amt. _____	Previous Authorized Amt. _____
Task Start Date _____ <i>No payment for work done PRIOR to this date</i>	Task Amt. _____	Task Amendment Amt. _____
Task End Date _____ <i>No payment for work done AFTER this date</i>	Total Task Amt. _____	Total Amended Task Amt. _____

Approval Signatures ****Note: Two original signed Documents are required.****

Consultant

Washington State Department of Transportation

Agreement Manager (Signature required for execution of document
ONLY for Creative Media Services Agreements)

Distribution: Originals: ☐ Consultant
☐ Accountant

Copies: ☐ File ☐ Consultant Services
☐ Task Manager ☐ Other _____